BEST AVAILABLE COPY

| | | | | | | | | | Application or Docket Number | | | | | |
|---|--|--------------------|---------------------------------|------------------------------------|----------------|--|--------------------|---------------------------------------|------------------------------|------------------------|------------|-------------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECO Effective November 10, 1998 | | | | | | | | | | | | | | |
| | | | | | | | | | 09/437296 | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN SMALL ENTITY | | |
| FOR | | | NUMBER FILED | | | NUMBER EXTRA | | | \TE | FEE | 1 | RATE | FEE | |
| BASIC FEE | | | | | | | | | | 380.00 | OR | | 760.00 | |
| TOTAL CLAIMS | | | / minus 20= | | | * | | | 9= | | OR | X\$18= | | |
| INDEPENDENT CLAIMS | | | minus 3 = | | | * | | X | 39= | | OR | X78= | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | +1 | 30= | 1 | OR | +260= | <u> </u> | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | | TAL | | IOR IOR | TOTAL | 760.00 | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | **** | <u> </u> | 1011 | OTHER | | |
| (Column 1) | | | | | | olumn 2) | (Column 3) | SM | ALÙ | ENTITY | OR | SMALL | | |
| AMENDMENT A | | REM AF | AIMS AINING TER IDMENT | | PF | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | R/ | ΤE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | ١ | Minus | ** | 20 | = / | X\$ | 9= | | OR | X\$18= | / | |
| | Independent | * | 1 | Minus | *** | <u> </u> | = / | X3 | 9= | | OR | X78= | | |
| | FIRST PRESE | NTATIC | ON OF MU | JLTIPLE DEF | PEND | DENT CLAIM | | +1: | 30= | | OR | +260≃ | / | |
| | | | | | | | | L | OTAL | | | TOTAL | | |
| | | (Col | umn 1) | | (C | Column 2) | (Column 3) | ADDIT | . FEE | |] | ADDIT. FEE | | |
| AMENDMENT B | | CL REM Al | AIMS AINING TER | | PF | HIGHEST NUMBER REVIOUSLY | PRESENT EXTRA | RA | TE | ADDI- TIONAL | | RATE | ADDI- TIONAL | |
| | Total | | NDMENT) | Minus | ** | PAID FOR | | | 9= | FEE_ | | V610 | FEE | |
| | Independent | * | 1 | Minus | *** | 20 · 3 | = / | | | -/- | OR | X\$18= | -/- | |
| | FIRST PRESENTATION | | ON OF MULTIPLE DEP | | END | DENT CLAIM | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | 9= | | OR | X78= | / | |
| | | | | | | | | +13 | 30= | | OR | +260≃ | | |
| | | | | | | | | | OTAL FEE | | OR | TOTAL ADDIT. FEE | | |
| | | | umn 1) | | | Column 2) | (Column 3) | | | 1 | | | 1 | |
| AMENDMENT C | | REM Al | AIMS AINING TER NDMENT | | PF | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | | Minus | ** | | = | X\$ | 9= | | OR | X\$18= | | |
| | Independent | * | · | Minus | *** | | = | Х3 | 9= | | | X78= | | |
| | FIRST PRESE | NTATIO | N OF MULTIPLE DEPE | | PENC | ENT CLAIM | | ├ | | | OR | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | 0= | | OR | +260= | | |
| ** | f the "Highest Nui If the "Highest Nu | mber Pr mber Pr | eviously Pa eviously Pa | uid For" IN THI aid For" IN THI | S SPA S SPA | ACE is less that ACE is less that | n 20 enter "20 " | ADDIT | | | | TOTAL ADDIT. FEE | _ | |
| | THE THY IEST NUM | ING! LIG | viousiy rai | uro: (lotalo) | mae | penaent) is the | e nignest number 1 | round in 1 | ne apr | propriate box | c in coli | umn 1. | | |